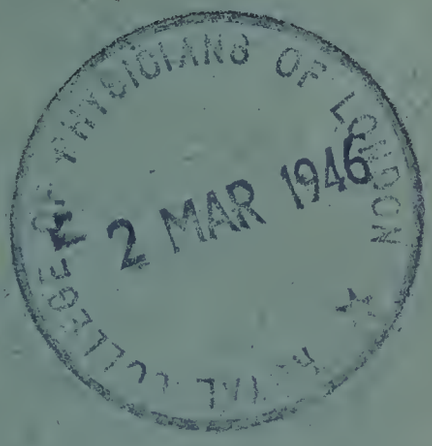
ROYAL SAMARITAN HOSPITAL FOR WOMEN

GLASGOW



MEDICAL REPORT

1944

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ROYAL SAMARITAN HOSPITAL for WOMEN

GLASGOW.

(Incorporated by Act of Parliament.)

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Her Majesty Queen Mary

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Associated with the Hospital.

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DONALD M'INTYRE, M.B.E., M.D., F.R.C.S.E., F.R.F.P.S.G., F.R.C.O.G., L.M., F.R.S.E.

* Temporary. † Absent on service.

The Report deals with patients in the wards of the Hospital who were discharged during the year 1944. The tabulation and classification of the details are similar to those employed in previous Reports. The explanation of the system of collecting and arranging the material has not been reprinted.

216 patients were treated in E.M.S. Hospitals by arrangement with the Department of Health. These patients were all operated upon by members of the staff of the Royal Samaritan Hospital for Women.

TABLE I.

Total number of patients	3,615*
,, ,, operations	3,413
Mortality	1·02%

* Corrected for readmissions.

TABLE II.

ETIOLOGICAL FACTORS.

Etiological Factors involved in the production of the pathological lesions detailed in Table V.

(The total here does not correspond to the number of patients, as frequently more than one factor is present.)

Total number in which infection associated with child bearing was an etiological factor	590
Total number in which infection unassociated with child bearing was an etiological factor	349
Total number in which injury associated with child bearing was an etiological factor	1,139
Total number in which newgrowth (tumour or cyst) was present	588
Total number where error of development appears ...	248
Total number where cause does not belong to above groups	1,167
No appreciable disease of genital organs	42

TABLE III.

Showing incidence of various combinations of Etiological Factors in individual cases analysed according to following numbered list :—

1. Infection associated with child bearing.
2. Infection unassociated with child bearing.
3. Injury associated with child bearing.
4. Newgrowth (tumour or cyst).
5. Error of development.
6. Other than the above causes.
7. No appreciable disease.

1	311	2 and 5	24
2	259	2 and 6	25
3	840	3 and 4	52
4	459	3 and 6	27
5	197	4 and 5	3
6	1,015	4 and 6	28
7	42	5 and 6	20
1 and 2	5	1, 2 and 3	2
1 and 3	199	1, 3 and 4	5
1 and 4	15	1, 3 and 5	1
1 and 5	1	1, 3 and 6	4
1 and 6	44	1, 4 and 6	2
2 and 3	9	1, 5 and 6	1
2 and 4	24	2, 5 and 6	1

Total, 3,615.

TABLE IV.

OPERATIONS.

Total operations by the abdominal route	354
Total operations by the perineal route	3,083

Abdominal operation alone	330
Abdominal operation plus major vaginal operation ...	3
Abdominal operation plus minor vaginal operation ...	21
Major vaginal operation alone	352
Minor vaginal operation alone	2,707
Total ...	3,413

*Remainder (treatment under anaesthesia other than operative)	26
Examination under anaesthesia	25
No operation performed	175

In some cases a patient has undergone more than one operation.

* Insertion of Pessary, correction of malposition, etc.

TABLE V.

PATHOLOGICAL CONDITIONS.

This list records the different lesions encountered in the 3,615 patients under consideration, and, like Table II., the total number does not correspond to the number of patients, as, in one patient, two or even three different lesions may be present.

TABLE

Schedule Number	Disease	Number of Cases.	Average Age.	Number Married.
			A. REGIONAL.	
				Vulva.
2	Imperforate hymen	3	28	2
3	Adhesion of labia	2	51	2
4	Acute vulvitis (including cellulitis) ...	1	41	1
5	Syphilis	1	17	...
8	Ulceration (benign)	2	47	2
11	Abscess of Bartholin's gland ...	16	36	14
13	Dermatitis	7	50	7
15	Pruritus	7	50	7
16	Leukoplakia	2	44	2
17	Kraurosis	1	60	1
18	Hypertrophy of clitoris	1	36	1
19	Hypertrophy of labium majus ...	1	44	1
20	Hypertrophy of labium minus ...	1	15	...
21	Fibroma	1	37	...
23	Papilloma (benign)	3	22	2
24	Adenomyoma	1	22	1
25	Sebaceous cyst	2	37	2
26	Epithelioma	3	58	3
27	Adeno-carcinoma	1	60	1
31	Cyst of Bartholin's gland (or duct) ...	15	38	13
36	Unclassified (diseases restricted to vulva)	4	39	3
				Vagina
37	Stenosis of vaginal orifice (congenital)	69	28	68
38	Atresia of vagina	1	34	1
39	Absence of vagina	1	19	1
40	Vaginal septum (congenital)	1	28	1
41	Vaginal cyst (Gartner's duct) ...	2	49	2
42	Vaginismus	2	37	2
43	Atrophy	1	44	...
44	Acute vaginitis	2	37	2

V.

Parous				Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
Percentage.	Average Number of Children.	Average Number of Miscarriages.	Average Number of years since last Pregnancy.						
...	...	...	...	3	11	3	...	...	...
100	4	·50	23	2	20	2	1	1	...
...	...	...	...	1	10	1	1	...	...
...	...	...	...	...	6	1	...	...	...
100	2	...	17	1	23	2	...	...	...
50	3	...	8	15	23	15	1	...	...
86	5	·83	15	3	14	4	2	2	...
86	5	·50	17	4	19	7	1	...	1
100	3	...	10	1	19	2	1	...	...
...	...	...	...	...	38	1	...	...	...
100	2	...	9	1	7	1	1	...	...
100	7	...	2	1	39	...	1	...	...
...	...	...	...	1	16	1	...	...	...
...	...	...	...	1	31	1	...	...	...
...	...	...	...	3	13	2	2	...	...
100	1	...	3	...	26	1	...	...	...
100	5	...	3	2	25	...	1	1	...
33	1	...	30	3	29	3	...	...	...
100	2	...	26	...	56	1	...	...	...
73	2	·09	10	15	22	14	4	...	...
75	4	·33	7	3	15	4	...	...	...
3	1	1·00	2	68	15	59	16	11	...
...	...	...	...	1	19	1	...	...	...
...	...	...	...	1	11	1	...	...	...
...	...	...	...	1	5	1	...	...	...
100	4	...	20	2	24	1	1	...	...
...	...	...	...	2	9	2	...	...	...
...	...	...	...	...	23	1	...	...	...
...	...	...	...	2	20	2	...	...	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e., opposite each pathological lesion when more than one was present in the same patient.

TABLE

Schedule Number.	Disease	Number of Cases.	Average Age.	Number Married.
				VAGINA
45	Chronic vaginitis	117	34	84
46	Seni'e vaginitis	13	56	13
47	Stenosis of vagina (inflammatory in origin)	2	45	1
48	Occlusion of vagina (inflammatory in origin)	1	24	1
52	Vaginal cyst (inflammatory in origin)	2	54	2
54	Fibroma	1	44	1
56	Vaginal cyst (neoplastic)	2	48	1
57	Epithelioma	1	51	1
				UTERUS
61	Underdevelopment of uterus—major degree (including rudimentary and infantile uterus)	4	22	2
62	Underdevelopment of uterus—minor degree (including cases of acute anteflexion with dysmenorrhoea and sterility)	134	25	88
62A	Primary dysmenorrhoea without underdevelopment of uterus ...	138	25	52
62B	Sterility where no pelvic abnormality is present	212	30	212
65	Uterus subseptus	1	32	1
67	Atresia of cervix	1	31	1
70	Chronic corporeal endometritis ...	42	33	42
72	Senile endometritis with pyometra ...	7	68	6
73	Tuberculosis of endometrium ...	11	31	10
74	Chronic cervical endometritis ...	121	38	111
76	Cervical erosion	765	33	685
77	Cervical erosion and endocervicitis ...	2	38	2
78	Chronic metritis	1	37	1
80	Inflammatory hypertrophy of vaginal cervix	43	43	42

V.

Parous									
Percentage.	Average Number of Children.	Average Number of Miscarriages.	Average Number of years since last Pregnancy.	Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
Contd.									
55	2	·52	9	99	17	80	57	9	...
92	5	·25	25	12	17	10	4	...	...
50	11	...	9	2	11	1	1	...	...
100	1	...	1	1	10	1	1	...	...
100	4	...	22	2	14	1	1	...	...
100	3	...	14	1	24	...	1	...	...
50	1	...	18	2	13	1	1	...	...
100	1	...	33	...	28	1	...	...	...
...	...	...	...	2	7	4	...	...	...
4	...	1·33	3	131	9	124	25	9	...
12	2	·35	9	134	9	129	21	1	...
21	1	·64	5	211	9	195	29	...	...
...	...	...	...	1	9	...	1	...	...
...	...	...	...	...	49	1	...	...	...
90	3	·71	4	42	10	25	17	3	...
86	4	·83	30	7	34	3	3	2	...
9	6	1	5	11	24	8	7	1	...
89	3	·28	8	120	16	71	67	13	1
79	3	·34	6	762	14	552	366	50	...
100	3	...	12	2	11	1	1	...	...
100	2	4	5	1	45	1	...	...	...
100	3	·30	10	43	21	24	31	6	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e., opposite each pathological lesion when more than one was present in the same patient.

TABLE

Schedule Number.	Disease	Number of Cases.	Average Age.	Number Married.
				Uterus
83	Simple general hypertrophy of uterus	8	37	8
84	Elongation of vaginal cervix (congenital)	3	67	1
85 & 86	Fibromyoma of body of uterus single-subserous	25	43	21
87 & 88	Fibromyoma of body of uterus single-intramural	43	40	36
89 & 90	Fibromyoma of body of uterus single-submucous	15	45	13
91 & 92	Fibromyoma of body of uterus single-intraligamentary	2	45	2
93 & 94	Multiple fibromyomata of uterus ...	118	43	82
95	Fibromyoma of cervix	5	44	4
96	Fibromyoma of cervix, with non-malignant secondary change ...	1	48	1
97	Mucous polypus of body	14	51	13
98	Mucous polypus of cervix	93	44	79
99	Fibroid or fibro-adenomatous polypus of body	14	44	12
100	Fibro-adenomatous polypus of cervix	3	38	2
101	Adeno-myoma	8	43	8
102	Sarcoma of body of uterus	4	53	4
105A	Carcinoma of cervix—Stage I. ...	10	49	10
105B	,, Stage II. ...	18	51	18
105C	,, Stage III. ...	12	49	11
105D	,, Stage IV. ...	2	43	1
106	Metropathia haemorrhagica and functional haemorrhage	409	39	326
107	Adenocarcinoma of body of uterus ...	26	57	20
109	Carcinomatous polypus of cervix ...	1	65	1
110	Delayed involution.—Superinvolution	13	29	12
111	Chronic subinvolution	21	35	21
113	Retained products of conception ...	4	29	4
114	Abortion—threatened	4	37	4

V.

Parous									
Percentage.	Average Number of Children.	Average Number of Miscarriages.	Average Number of years since last Pregnancy.	Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
Contd.									
100	3	·25	6	8	10	8	...	1	...
33	1	...	36	3	19	3	...	1	...
72	2	·22	13	22	18	19	5	5	1
56	2	·75	11	42	22	40	10	2	2
73	2	·45	13	15	24	12	7	...	...
100	6	·50	11	2	16	1	1	...	1
39	2	·30	14	117	23	113	32	5	6
60	7	·67	16	5	21	3	3	1	...
100	3	...	13	1	14	1	...	...	...
79	4	·09	20	14	14	9	4	1	...
67	3	·40	16	93	15	60	50	9	1
86	5	·33	10	14	17	14	2	1	...
33	3	1	13	3	12	3	...	...	...
75	3	·17	17	8	22	6	2	2	...
50	7	·50	28	3	42	4	...	...	1
90	4	·33	16	8	36	10	2	...	...
100	4	·61	19	12	32	18	...	...	...
100	6	·50	14	8	23	12	...	...	1
50	5	1	2	...	21	2	...	...	...
70	3	·54	10	398	12	364	84	10	...
69	4	·50	21	19	32	23	5	...	5
100	4	...	26	1	44	1	1	...	...
100	1	·69	2	13	10	13	6	1	...
100	2	·43	6	20	13	18	7	...	...
100	2	1	$1\frac{4}{2}$	2	8	3	1	...	...
100	4	·50	2	...	13	4	...	...	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e., opposite each pathological lesion when more than one was present in the same patient.

TABLE

Schedule Number.	Disease	Number of Cases.	Average Age.	Number Married.
				Uterus
115	Abortion—incomplete	51	32	48
116	Abortion—missed	5	32	5
117	Hydatidiform mole	1	32	1
122	Chorion epithelioma, with metastasis	1	48	1
124	Unclassified diseases (restricted to uterus)	3	37	2
				Tubes
132	Hydrosalpinx	8	39	8
133	Salpingitis	5	31	5
247	Acute salpingo-oöphoritis with pus formation	1	47	1
248	Chronic salpingo-oöphoritis—with pus formation	4	30	3
249	Chronic salpingo-oöphoritis—without pus formation	37	32	32
250	Salpingo-oöphoritis of tuberculous origin	15	29	14
139	Tubal pregnancy—unruptured and without mole-formation	2	33	2
140, 141 and 143	Tubal pregnancy, with mole formation, tubal abortion, or tubal rupture	7	28	7
148	Unclassified (diseases restricted to Fallopian tubes)	2	45	2
148A	Occluded tubes (according to tubal insufflation)	117	30	117
				Ovaries
154	Small cystic degeneration of ovary ...	28	36	24
155	Simple serous cyst	23	38	17
156	Cyst of corpus luteum	5	38	5
157 & 158	Pseudomucinous cyst-adenoma ...	25	43	15
159	Pseudomucinous cyst-adenoma, with malignant transition	1	51	1

V.

Parous									
Percentage.	Average Number of Children.	Average Number of Miscarriages.	Average Number of years since last Pregnancy.	Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
Contd.									
100	2	·82	2	50	10	50	14	1	...
100	3	·60	4	5	11	5	...	...	...
100	1	1	1	1	16	1	...	...	...
100	10	3	3	1	26	1	...	...	1
67	1	1·50	18	...	14	3	...	...	...
88	1	...	18	8	24	2	4	2	...
100	1	·40	6	3	28	5	...	...	...
100	2	1	5	1	26	1	...	...	...
75	4	...	5	4	34	4	...	...	1
54	3	·45	8	28	21	30	13	1	...
20	2	...	3	14	21	13	3	1	...
100	1	·50	10	2	24	2	...	...	...
100	1	...	2	7	25	7	...	...	...
100	3	...	13	2	29	1	2	...	...
17	1	·40	7	117	10	75	48	11	...
61	2	·35	9	28	22	7	19	2	...
57	2	·15	12	22	25	16	6	4	...
60	2	...	13	5	23	2	1	3	...
48	3	·08	15	24	23	25	6	...	1
100	10	...	9	1	4	1	...	...	1

* Deaths are shown opposite primary, additional and terminal conditions, i.e., opposite each pathological lesion when more than one was present in the same patient.

TABLE

Schedule Number.	Disease	Number of Cases.	Average Age.	Number Married.
				OVARIES
160	Pseudomucinous cyst-adenoma, with other secondary change	1	40	1
161 & 162	Serosal cyst-adenoma	5	38	5
163	Serosal cyst-adenoma, with malignant transition	1	43	1
165 & 166	Dermoid cyst	11	36	8
169	Tarry cysts of ovary (endometrioma)	19	40	16
171	Carcinoma—primary	11	54	8
172	Carcinoma—metastatic	3	47	3
174	Fibroma	8	38	7
176	Fibromyoma	1	49	...
177	Sarcoma	2	61	2
178	Haematoma diffuse	1	50	1
182	Unclassified (diseases restricted to ovaries)	2	45	2
182B	Granulosa cell tumour	2	52	2
182C	Brenner tumour	1	42	...
				LIGAMENTS, PERITONEUM
183	Fimbrial cyst	9	34	6
184	Epoöphoritic cyst (parovarian) ...	2	44	2
185	Pelvic cellulitis	7	30	7
186	Pelvic cellulitis, with abscess formation	1	36	1
187	Pelvic peritonitis	2	36	2
188	Pelvic peritonitis (encysted)	3	33	3
189	Peritoneal adhesions (post-operative)	1	36	1
194	Unclassified (diseases restricted to ligaments, peritoneum and cellular tissue)	4	41	3

V.

Parous									
Percentage.	Average Number of Children.	Average Number of Miscarriages.	Average Number of years since last Pregnancy.	Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
Contd.									
...	...	...	...	1	18	1	...	...	...
80	4	·50	10	5	27	5	1	...	...
...	...	...	...	1	52	1	...	...	...
64	3	·43	4	11	25	9	2	1	...
47	2	·67	10	19	25	6	13	3	...
64	2	...	19	10	34	10	1	...	...
67	10	...	7	3	25	3	...	...	...
63	2	·80	13	8	18	6	3	...	...
...	...	...	...	1	27	1	...	...	...
100	3	1·50	18	2	23	2	1	...	...
100	3	...	11	1	28	...	1	...	...
100	2	...	12	1	22	2	1	...	...
100	2	·50	22	2	25	2	...	...	...
...	...	...	...	1	24	1	...	...	...
AND CELLULAR TISSUE									
56	4	...	12	9	25	6	3	2	...
...	...	...	...	2	27	2	...	...	...
86	2	·43	2	...	21	7	...	...	...
100	5	1	5	...	27	1	...	...	...
50	1	...	7	2	21	1	2	...	...
100	1	...	8	3	23	2	1	...	...
100	1	2	8	1	28	1	...	...	...
50	3	...	9	4	20	3	1	...	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e, opposite each pathological lesion when more than one was present in the same patient.

TABLE

Schedule Number.	Disease	Number of Cases.	Average Age.	Number Married.
				URINARY
201	Chronic nephritis	4	35	4
203	Generalised infection of urinary tract —chronic	3	34	3
204	Chronic urethritis	1	22	1
205	Acute cystitis	1	35	1
206	Chronic cystitis	2	49	2
207	Pyelitis	4	31	3
210	Perinephric abscess	1	45	1
219	Urethral caruncle	65	54	61
227	Unclassified (diseases restricted to urinary tract)	4	47	3
			B. GENERAL	
			MALFORMATIONS AND	
239	Uterus didelphys	1	30	1
242	Pseudohermaphroditism	1	19	...
			DISEASED CONDITIONS	
256	Unclassified (but belonging to diseased conditions resulting from infection)	2	33	2

V.

Parous				Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
Percentage.	Average Number of Children.	Average Number of Miscarriages.	Average Number of years since last Pregnancy.						
TRACT									
100	5	·50	3	3	17	3	1	1	1
100	2	·67	11	2	19	2	1	...	...
100	1	...	2	1	26	1	...	...	...
100	3	1	3	...	15	1	...	...	...
100	4	1	13	2	14	1	1	1	...
75	4	1	6	2	19	3	...	1	...
100	8	...	6	1	23	...	...	1	1
92	4	·35	20	65	16	51	28	7	...
75	3	·67	16	3	7	3	1	1	1
ERRORS OF DEVELOPMENT									
...	...	...	...	1	47	1	...	1	...
...	...	...	...	1	63	1	...	...	...
RESULTING FROM INFECTION									
100	1	1	7	1	19	2	...	...	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e., opposite each pathological lesion when more than one was present in the same patient.

TABLE

Schedule Number.	Disease	Number of Cases.	Average Age.	Number Married.
	Obstetric and other Injuries, Prolapse and			
261	Injury of urethral sphincter	1	48	1
262	Prolapse of urethral mucous membrane	5	41	4
263	Perineal laceration without involvement of sphincter ani	161	44	161
263 and 267	Lacerated perineum without involvement of sphincter ani and lacerated cervix	18	39	18
263 and 271	Perineal laceration (without involvement of sphincter ani) and cystocele	242	45	242
263 and 274	Perineal laceration (without involvement of sphincter ani) and prolapse with hypertrophy of vaginal cervix	11	42	11
264	Perineal laceration with involvement of sphincter ani	31	36	31
265	Vaginal laceration	1	43	1
266	Vaginal laceration with stricture ...	3	35	3
267	Cervical laceration	87	35	85
271	Cystocele	69	43	67

V.

Parous				Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
Percentage.	Average Number of Children.	Average Number of Miscarriages.	Average Number of years since last Pregnancy.						
Fistulae, Displacements									
Hernias									
100	2	...	16	1	22	1	...	...	...
80	2	·25	12	5	26	3	3	1	...
99	3	·45	10	158	23	34	119	22	2
100	3	·39	7	17	23	13	8	2	...
100	4	·34	8	238	23	172	121	17	3
100	4	·91	9	11	26	10	4	...	...
100	3	·23	5	30	27	24	6	3	...
100	4	...	5	1	18	1	...	...	...
100	2	...	7	3	10	1	2	...	...
98	3	·33	7	85	20	60	49	12	...
99	4	·51	10	66	21	55	30	5	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e , opposite each pathological lesion when more than one was present in the same patient

TABLE

Schedule Number.	Disease	Number of Cases.	Average Age.	Number Married.
		Obste	tric and	other
272, 273, 274, 275, and 278	Prolapse of uterus, incomplete and complete	271	52	268
276	Cystocele and rectocele	193	46	192
277	Rectocele	73	44	73
282, 283, 284 and 285	Retrodisplacement of uterus ...	181	32	160
286	Retrodisplacement of gravid uterus...	1	32	1
291	Vesico-vaginal fistula	1	59	1
293	Recto-vaginal fistula	12	33	12
300	Inguinal hernia	1	44	1
304	Ventral hernia, post-operative ...	2	45	2
306	Perineal hernia	1	36	1
307	Unclassified (but belonging to obstetric and other injuries, fistulae, displacements, prolapse and hernias)	1	76	1
	C. DISEA	SES OU	TWITH	THE
309	Anaemia, primary	1	46	1
310	Anaemia, secondary	1	53	1

V.

Parous: Percentage.	Parous: Average Number of Children.	Parous: Average Number of Miscarriages.	Parous: Average Number of years since last Pregnancy.	Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
INJURIES, ETC.—*Contd.*									
99	4	·35	16	263	26	253	95	13	4
100	4	·56	11	188	23	163	86	15	1
99	3	·39	11	71	25	44	31	10	...
70	2	·44	6	178	12	123	85	21	1
100	...	...	...	1	6	1	...	...	...
100	4	...	19	1	35	1	...	...	...
100	2	·17	4	12	29	9	4	1	...
100	4	1	9	...	16	1	...	...	...
100	3	...	1	2	28	2	...	...	...
100	6	3	1	1	20	1	...	...	...
100	7	1	34	1	18	...	1	...	...
GENITAL AND URINARY TRACTS									
100	1	...	12	...	6	1	...	...	...
100	4	...	16	...	47	1	...	...	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e., opposite each pathological lesion when more than one was present in the same patient.

TABLE

Schedule Number	Disease	Number of Cases.	Average Age.	Number Married.
			Diseases out	with the
311	Leukaemia—splenomedullary ...	1	40	1
316	Thrombosis femoral vein	6	52	6
319	Pulmonary embolism	3	42	3
323	Endocarditis	1	41	1
326	Myocardial degeneration	5	48	5
327	Valvular disease of heart	2	28	2
329	Bronchitis	2	49	2
331	Pneumonia	1	41	1
337	Diabetes	10	53	10
338	Excessive deposit of fat (obesity) ...	2	47	2
341	Rheumatism	2	56	2
348	Sciatica—neuritis	1	41	1
350	Haemorrhoids	6	37	5
354	Anal fissure	1	30	1
355	Fistula in ano	1	59	1
356	Coccygodynia	1	41	1

V.

Parous: Percentage.	Parous: Average Number of Children.	Parous: Average Number of Miscarriages.	Parous: Average Number of years since last Pregnancy.	Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present.	Number of Deaths.*
GENITAL AND URINARY TRACTS—*Contd.*									
...	...	...	...	1	12	1	...	...	...
100	6	·17	15	6	54	...	3	3	...
67	1	...	8	3	8	...	3	...	3
100	3	...	11	1	40	...	...	1	1
80	1	·75	10	3	25	2	4	...	4
100	...	1	8	2	25	...	2	...	...
100	7	1	15	1	29	1	1	...	...
100	3	...	11	1	40	...	...	1	1
90	8	·56	16	3	19	1	6	3	...
100	4	...	19	...	8	2	...	...	...
50	2	1	1	...	42	1	1	...	1
100	3	1	7	1	8	1	...	...	...
67	2	...	6	5	19	2	4	...	...
100	4	...	4	1	28	1	...	...	...
100	2	...	25	1	49	...	1	...	...
100	1	...	11	1	12	1	...	...	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e., opposite each pathological lesion when more than one was present in the same patient.

TABLE

Schedule Number	Disease	Number of Cases	Average Age	Number Married
			Diseases out	with the
357	Ischio-rectal abscess	1	58	1
360	Chronic appendicitis	7	35	5
361	General peritonitis	5	35	3
362	Carcinoma of alimentary tract ...	4	50	3
363	Carcinoma of alimentary tract, with metastatic growth in genital tract	1	41	1
366	Carcinoma of gall bladder	1	41	1
368	Exophthalmic goitre—Hyper-thyroidism	1	42	1
373	Unclassified (but belonging to diseases outwith the genital or urinary tracts)	15	42	14
	D. Conditio	ns not	classi	fiable
374	Normal pregnancy	38	32	37
375	No appreciable disease	42	35	35
376†	No diagnosis supplied	3	47	3

† Two of the three patients in this group left hospital before a diagnosis was made.

V.

Parous				Number of cases in which operation was performed.	Average Number of days in Hospital.	Number of cases in which lesion was primary.	Number of cases in which one additional lesion was present.	Number of cases in which two additional lesions were present	Number of Deaths.*
Percentage.	Average Number of Children.	Average Number of Miscarriages.	Average Number of years since last Pregnancy.						
GENITAL AND URINARY TRACTS—*Contd.*									
100	2	...	24	1	43	1	1	...	...
71	4	...	7	6	23	6	1	1	1
60	4	...	13	5	28	3	1	2	4
75	5	1	13	3	22	4	...	...	...
...	...	...	...	1	27	1	...	...	...
100	...	1	10	1	3	1	1	...	1
100	1	...	12	...	19	1	1	...	...
60	4	·22	15	13	24	10	4	1	...
UNDER A, B OR C									
100	3	·42	3	9	10	33	8	...	...
64	2	·44	7	25	9	42	...	...	...
67	3	...	15	1	3	3	...	...	...

* Deaths are shown opposite primary, additional and terminal conditions, i.e., opposite each pathological lesion when more than one was present in the same patient.

TABLE VI.

FATAL CASES.

A brief summary of each fatal case is given. An asterisk indicates that a post-mortem examination was performed.

1. Aged 40. Multiple uterine fibroids. Subtotal hysterectomy performed. Patient died thirteen days after operation from pulmonary embolism.

2. Aged 54. Adenocarcinoma of uterine body. Total hysterectomy and bilateral salpingo-oöpherectomy performed. Patient developed paralytic ileus and died six days after operation.

3. Aged 56. Cystocele, deficient perineum and chronic cervicitis. Dilatation, curettage, cauterisation of cervix, anterior colporrhaphy and colpo-perineorrhaphy performed. Patient died four days after operation from pulmonary embolism.

4. Aged 42. Uterine fibroid. Subtotal hysterectomy and right salpingo-oöphorectomy performed. Patient died of secondary intraperitoneal haemorrhage on the day following operation.

5. *Aged 48. Multiple fibroids. Subtotal hysterectomy and bilateral salpingo-oöphorectomy performed. Patient died ten days after operation. At autopsy broncho-pneumonia and peritonitis were found.

6. *Aged 40. Adenocarcinoma of body of uterus with extension to vagina and metastases. Operation was confined to diagnostic curettage with biopsy of vaginal tumour. The patient died forty-nine days after admission to hospital from cachexia. At autopsy the clinical findings were confirmed.

7. Aged 62. Adenocarcinoma of body of uterus. Patient in extremis at time of admission. Death occurred two days after admission to hospital. No operation.

8. Aged 65. Cystocele and deficient perineum. Anterior colporrhaphy and colpo-perineorrhaphy performed. Patient died suddenly ten days after operation from pulmonary embolism.

9. Aged 40. Prolapse with elongation of supra-vaginal cervix. Plastic operation for repair of prolapse performed. Patient died five days after operation from pulmonary embolism.

10. Aged 46. Uterine fibroid. Subtotal hysterectomy performed. Patient died during operation under gas and oxygen anaesthesia. Anaesthetic death.

11. Aged 58. Adenocarcinoma of body of uterus. Diagnostic curettage, followed ten days later by total hysterectomy. Patient died four days after operation with symptoms of cardiac failure.

12. *Aged 55. Adenocarcinoma of ovary. Laparotomy was postponed on account of chest condition, and patient died ten days after admission to hospital. At autopsy an enormous, inoperable malignant tumour of the left ovary was found.

13. Aged 39. Retroversion of uterus. Extraperitoneal suspension of uterus performed. Patient died seven days after operation from pulmonary embolism.

14. Aged 50. Multiple fibroids. Adenocarcinoma of uterine body extending into cervix. Hysterectomy performed. Patient died during operation under gas and oxygen anaesthesia. Anaesthetic death.

15. Aged 49. Procidentia. Plastic operation for repair of prolapse performed. Patient died a few hours after operation with signs of cardiac failure.

16. *Aged 47. Procidentia. Plastic operation for repair of prolapse. Patient died six days after operation from pulmonary embolism.

17. Aged 45. Deficient perineum. Dilatation, curettage and colpo-perineorrhaphy performed. Patient died nine days after operation from pulmonary embolism.

18. Aged 66. Prolapse with elongation of supra-vaginal cervix. Plastic operation for repair of prolapse performed. Patient died six days after operation from pulmonary embolism.

19. Aged 27. Uterine sarcoma. Laparotomy performed. Condition found to be inoperable. Patient's condition deteriorated steadily and death occurred eighteen days after operation.

20. Aged 41. Multiple fibroids. Subtotal hysterectomy and right salpingo-oöphorectomy performed. Patient died four days after operation from pulmonary embolism.

21. Aged 54. Cystocele, rectocele and cervical polypus. Dilatation, curettage, anterior colporrhaphy and colpo-perineorrhaphy performed. Patient died eight days after operation from pulmonary embolism.

22. Aged 61. Pruritus vulvae. Injection of vulva with proctocaine performed. Patient died of cardiac failure a few days after she was allowed to get up.

23. Aged 51. Malignant tumour of ovary. Laparotomy performed. Condition found to be inoperable. Patient died on the day following operation.

24. Aged 27. Tuberculous peritonitis. Laparotomy performed and portion of peritoneum removed for histological examination. Extensive tuberculous infection was reported. Patient's condition deteriorated after operation, and death occurred forty-five days later.

25. *Aged 44. Acute appendicitis with generalised peritonitis. Appendicectomy with drainage performed. Patient died twenty-two days after operation from lobar pneumonia. At post-mortem perinephric abscess also found.

26. Aged 51. Uterine fibromyomata producing urinary obstruction, with resultant pyelonephritis. Death occurred from uraemia two days after admission. No operation performed.

27. Aged 28. Mitral stenosis with menorrhagia. Diagnostic curettage performed. Patient died five days after operation with symptoms of cardiac failure.

28. Aged 34. Bilateral pyosalpinx. Peritoneal adhesions. Left salpingo-oöphorectomy and separation of adhesions performed. Patient died three days after operation from cardiac failure.

29. Aged 35. Multiple uterine fibroids. Total hysterectomy and left salpingo-oöphorectomy performed. Patient died seven days after operation with symptoms of cardiac degeneration.

30. *Aged 41. Uterine fibromyomata. On laparotomy such dense adhesions were found between bowel, genital organs and anterior abdominal wall, that further operation was considered impracticable. Menopausal dose of deep X-ray therapy was given. Patient died thirty-eight days after operation. At autopsy chronic colitis with peritonitis was found. In addition there was bacterial endocarditis of the mitral valve and terminal pneumonia.

31. Aged 32. Re-admission. November-December 1943: carcinoma of cervix, stage III. Biopsy performed and radium and deep X-ray therapy applied. Patient was obviously dying on re-admission and treatment could only be palliative.

32. *Aged 55. Cystocele and deficient perineum. Dilatation and curettage, anterior colporrhaphy and colpo-perineorrhaphy performed. Nine days later the patient showed evidence of urinary infection and within three days became comatose. Patient died thirteen days after operation. At autopsy an acute infection of the urinary tract, and extensive fatty degeneration of the arterial system and fatty infiltration of the heart were found.

33. Aged 41. Fibromyoma of uterus (single, intraligamentary). Inoperable carcinoma of gall-bladder found at operation. Myomectomy performed. Patient died twenty-four hours after operation.

34. Aged 76. Adenocarcinoma of body of uterus. Diagnostic curettage performed and radium inserted. This patient was in the late stages of cachexia on admission and the condition deteriorated very rapidly after operation. Death occurred ten days after operation.

35. Aged 48. Chorion epithelioma of uterus with metastases. Diagnostic curettage, followed by pan-hysterectomy performed. Patient died two days after second operation. Histological examination revealed an atypical and highly malignant form of chorion epithelioma.

36. *Aged 47 years. Multiple fibroids of uterus. Subtotal hysterectomy. Bilateral salpingo-oöphorectomy performed. Patient died nine days after operation from pulmonary embolism. Cause of death was confirmed by autopsy.

37. Aged 82. Senility. Advanced myocardial degeneration. Rheumatism. Paraplegia. Death occurred after patient had been seventy-nine days in hospital.

Summary.

Cases in which patient was beyond aid on admission ...	4
Cases in which only a palliative operation for the comfort of the patient was possible	7

Remainder.

Cardiac failure and pulmonary complications	19
Anaesthetic deaths	2
Cachexia	1
Paralytic ileus	1
Haemorrhage	1
Renal failure	1
Peritonitis	1

Of the total, 10 cases were proved cases of malignant disease.

NINTH ANNUAL REPORT.

PATHOLOGICAL DEPARTMENT.

JANUARY 1ST, 1944—DECEMBER 31ST, 1944.

General Arrangements.

The pathologists have remained the same as last year. The senior technician remains unchanged. In October a junior technician was appointed. Assistance in the technical work has been rendered by Sister Imrie.

Routine Examinations.

The examinations carried out during the year were :—

Histological examinations	1,480
Bacteriological examinations	592
Chemical examinations	11
Tests for pregnancy	4
Total	2,087

This represents an increase of 239 examinations over the previous year, and is well above the average pre-war figure.

The pathological conditions found in patients admitted to the wards are detailed in Table V.

Post-Mortem Eaxminations.

Ten post-mortem examinations were performed during the year. Particulars of interest are noted in Table VI.

Museum.

A number of specimens have been retained for subsequent inclusion in the museum. For reasons of economy they have not been mounted, and at present are stored in preserving fluid. Dr. A. M. Stewart has continued the rearrangement and expansion of the collection of microscopic preparations.

A. M. SUTHERLAND.

Explanatory Note with regard to the Radiation Treatment of Malignant Disease of the Cervix.

Until the outbreak of war our supply of radium consisted mainly of that on loan from the Radium Institute. This consisted of 2 units, each of 50 mgms. This supply was recalled in September 1939. Another unit for treatment of cancer of the cervix (47 mgm.) became the property of the Hospital in 1934.

Until 1934 radium alone was employed and the maximum dosage used was 6,000 mgm. hours. Since the opening of the X-ray Department in 1934, the dosage has been 4,800 mgm. hours (this dosage is also assessed in *r* units) followed by deep X-ray therapy. For special reasons a very few cases have been treated with radium alone at the old dosage.

The method of treatment employed has been a modification of the Paris technique for the treatment of carcinoma of the cervix. With the 50 mgm. units of radium, 30 mgm. were inserted into the cervical canal and 10 mgm. into both lateral fornices. With the 47 mgm. unit, the uterine dose was 20 mgm., the remainder being inserted into the lateral fornices. Careful notes and follow-up records have been kept to date. These records, including those of patients treated with the 47 mgm. unit belonging to the Hospital, were returned each year to the Radium Officer of the Radium Institute recognised by the Radium Commission. The records were submitted with a view to publication with the results from other hospitals. This return of records ceased in September, 1939.

Of the patients treated by deep X-ray therapy, as shown on pages 35 and 36, the following also had radium treatment :—

Carcinoma of cervix, Stage I. ...	108 cases
Carcinoma of cervix, Stage II. ...	167 cases
Carcinoma of cervix, Stage III.	98 cases
Carcinoma of cervix, Stage IV.	32 cases
Carcinoma of uterine body ...	69 cases
Carcinoma of vagina	3 cases
Recurrence of malignancy ...	2 cases
Sarcoma of uterus	3 cases
Carcinoma of ovary	1 case

TENTH ANNUAL REPORT (1944).

THE RADIOLOGICAL DEPARTMENT.

There are no changes to report in the running of the Department, and the Staff remains the same in numbers and in individuals as in 1943. The apparatus is the same, and there have been no failures in the X-ray tubes or valves. The deep therapy tube had completed 4,840 running hours by the end of the year.

The figures for cases treated by X-rays show a slight drop (30) compared with the figures for 1943, and that drop is due entirely to a fall in the numbers of the simple, non-malignant type of case. The detailed review attached shows an increase in the number of malignant cases treated.

An extract from the review shows a five-year survival rate of 54 per cent. for Stage I. Cancer of the Cervix, 40 per cent. for Stages I. and II. Cancer of the Cervix, and 31 per cent. for all grades of Cancer of the Cervix.

(*Signed*) S. D. SCOTT PARK.

A detailed report of the work of the department follows :—

1944.

	Cases	Attendances
Deep Therapy	328	2,375
Diathermy	151	1,070
Sunlight	1	2
Radiant Heat	38	237
Therapy Clinic Reports	—	1,158
Diagnostic X-rays	320	608 Films
Deep X-ray Therapy Tube	2,948 hrs. — 4,840 hrs. = 1,892 hrs.	
Mercury Vapour Burner (Renewed)	0 hrs. — 20 hrs. = 20 hrs.	

	Carcinoma of Cervix.								Carcinoma of Uterine Body.		Carcinoma of Ovary.		Carcinoma of Vulva.	
	Stage I.		Stage II.		Stage III.		Stage IV.							
	Reporting	Died.	Reporting	Died.	Reporting	Died.	Reporting	Died.	Reporting	Died.	Reporting	Died.	Reporting	Died.
Cases treated ... 1937		18		21		7		6		12		8		0
Follow-up ...	5	13 { 1 in 1937, 2 in 1938, 6 in 1939, 1 in 1940, 2 in 1941, 1 in 1943	6	15 { 1 in 1937, 6 in 1938, 4 in 1939, 2 in 1941, 2 in 1942	1	6 { 3 in 1938, 2 in 1939, 1 in 1941	0	6 { 4 in 1937, 1 in 1938, 1 in 1940	6	6 { 1 in 1938, 2 in 1941, 1 in 1942, 1 in 1943, 1 in 1944	2	6 { 1 in 1937, 2 in 1938, 1 in 1940, 1 in 1942, 1 in 1944	—	—
Cases treated ... 1938		12		26		21		5		13		16		2
Follow-up ...	9	3 { 1 in 1939, 1 in 1942, 1 in 1943	8	18 { 2 in 1938, 7 in 1939, 5 in 1940, 3 in 1941, 1 in 1942	5	16 { 1 in 1938, 6 in 1939, 2 in 1940, 4 in 1941, 2 in 1942, 1 in 1943	0	5 { 1 in 1938, 2 in 1939, 1 in 1940, 1 in 1942	4	9 { 1 in 1938, 2 in 1939, 3 in 1940, 2 in 1941, 1 in 1943	6	10 { 3 in 1938, 2 in 1939, 1 in 1940, 2 in 1941, 1 in 1942, 1 in 1943	1	1 in 1941
Cases treated ... 1939		11		18		24		4		8		6		3
Follow-up ...	9	2 in 1941	8	10 { 5 in 1940, 3 in 1941, 1 in 1942, 1 in 1944	4	20 { 4 in 1939, 10 in 1940, 5 in 1941, 1 in 1942	0	4 { 3 in 1940, 1 in 1941	3	5 { 2 in 1940, 1 in 1942, 2 in 1943	2	4 in 1940	0	3 { 2 in 1940, 1 in 1942
Cases treated ... 1940		14		14		4		1		6		9		3
Follow-up ...	8	6 { 2 in 1941, 2 in 1942, 1 in 1943, 1 in 1944	5	9 { 1 in 1940, 4 in 1941, 2 in 1942, 1 in 1943, 1 in 1944	0	4 { 3 in 1941, 1 in 1943	0	1 in 1941	2	4 { 3 in 1941, 1 in 1943	1	8 { 3 in 1941, 2 in 1942, 2 in 1943, 1 in 1944	0	3 { 2 in 1940, 1 in 1941
Cases treated ... 1941		5		4		9		1		7		8		5
Follow-up ...	3	2 in 1942	2	2 { 1 in 1942, 1 in 1943	3	6 in 1942	0	1 in 1942	3	4 { 1 in 1942, 3 in 1943	1	7 { 1 in 1941, 5 in 1942, 1 in 1944	0	5 in 1942
Cases treated ... 1942		11		12		7		2		11		21		5
Follow-up ...	9	2 in 1943	8	4 { 2 in 1943, 2 in 1944	3	4 { 1 in 1942, 3 in 1944	0	2 in 1942	8	3 { 1 in 1942, 2 in 1943	5	16 { 4 in 1942, 7 in 1943, 5 in 1944	2	3 { 2 in 1942, 1 in 1944
Cases treated ... 1943		13		8		8		2		17		12		4
Follow-up ...	12	1 in 1944	5	3 in 1944	4	4 in 1944	0	2 in 1944	13	4 in 1944	8	4 in 1944	1	3 in 1944
Cases treated ... 1944		10		19		7		0		16		14		2
Follow-up ...	10	0	17	2 in 1944	6	1 in 1944	—	—	16	0	10	4 in 1944	1	1 in 1944

	Carcinoma of Vagina.		Carcinoma of Breast.		Treatment Discontinued before Completion.	Various.		Sarcoma of Uterus.		Further Treatment for Recurrence of Malignancy.		Pruritus Vulvae.		Functional Uterine Hæmorrhage.		Total.
	Reporting	Died.	Reporting	Died.	Died.	Reporting	Died.	Reporting	Died.	Reporting	Died.	Reporting	Dismissed.	Reporting	Dismissed.	
Cases treated ... 1937	—		3		3	4		1		4		5		28		= 120
Follow-up ...	—		0	3 { 1 in 1938 1 in 1939 1 in 1942	—	0	4 { 3 in 1937 1 in 1938	0	1 in 1943	0	4 in 1938	0	5 { 3 in 1937 2 in 1938	0	28 { 14 in 1937 10 in 1938 4 in 1939	
Cases treated ... 1938	1		—		7	—		1		13		6		18		= 141
Follow-up ...	0	1 in 1939	—		—	—		1	0	0	13 { 11 in 1938 2 in 1939	0	6 { 4 in 1938 2 in 1939	0	17 in 1938 1 died	
Cases treated ... 1939	—		—		—	1		1		9		3		33		= 121
Follow-up ...	—		—		—	0	1 in 1939	0	1 in 1940	1	8 { 2 in 1939 5 in 1940 1 in 1942	0	3 { 2 in 1939 1 in 1940	1	31 { 9 in 1939 10 in 1940 12 in 1941 1 died	
Cases treated ... 1940	—		—		—	6		—		22		3		82		= 164
Follow-up ...	—		—		—	0	6 { 2 in 1940 4 in 1941	—		1	21 { 13 in 1941 5 in 1942 3 in 1944	0	3 in 1940	0	82 { 46 in 1940 34 in 1941 2 in 1942	
Cases treated ... 1941	—		1		—	3		2		11		7		159		= 222
Follow-up ...	—		0	1 in 1942	—	1	1 in 1942 1 dismissed	1	1 in 1943	1	10 { 8 in 1942 2 in 1943	0	7 { 2 in 1941 5 in 1942	0	159 { 99 in 1941 60 in 1942	
Cases treated ... 1942	1		2		—	1		—		3		4		202		= 282
Follow-up ...	0	1 in 1942	0	2 { 1 in 1942 1 in 1944	—	1	0	—		0	3 { 1 in 1942 2 in 1943	0	4 { 3 in 1942 1 in 1943	0	202 { 201 in 1942 1 in 1943	
Cases treated ... 1943	1		5			2		2		3		6		275		= 358
Follow-up ...	1	0	2	3 in 1944	—	1	1 in 1944	2	0	2	1 in 1944	0	6 in 1944	0	275 { 200 in 1943 75 in 1944	
Cases treated ... 1944	1		1		2	4		2		7		5		238		= 328
Follow-up ...	1	0	1	0	1 in 1944	3	1 in 1944	2	0	6	1 in 1944	0	5 in 1944	37	201	